

**U.S. PROBATION OFFICE**  
**MONTHLY SUPERVISION REPORT FOR THE MONTH OF**

Aug 5 2005  
Aug 20 2005

Name: <u>Noorullah Zafar</u>		Court Name (if different):	
PART A: RESIDENCE (If new address, attach copy of lease/purchase agreement)			
Street Address, Apt. Number: <u>[REDACTED] Huntington</u>		Home Phone: <u>[REDACTED]</u>	Pager Phone: <u>[REDACTED]</u>
City, State, Zip Code: <u>Sta. L. I. N.Y. 11746</u>		Persons Living with you: <u>wife + Children</u>	
Condo/Subdivision: <u>Own or Rent?</u>		Did you move during the month? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Mailing Address (if different):		If yes, date moved: _____ Reason for Moving: _____	

PART B: EMPLOYMENT (If unemployed, list source of support under Part D)			
Name Address, Phone No. of Employer: <u>I.E. A</u> <u>35-16 MAIN ST.</u> <u>FLUSHING N.Y. 11355</u>		Name of immediate supervisor: <u>MR. MUJAHID</u>	
		Is your employer aware of your criminal status? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
		How many days of work did you miss? <u>80</u> Why? _____	
Did you change jobs? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Position Held: <u>1st sect</u>	Gross Income: <u>2000.</u>
Were you terminated? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Normal Work Hours: <u>55</u>	
If changed jobs or terminated, state when and why: _____			

PART C: VEHICLES (List all vehicles owned or driven by you)			
1. Year/Make/Model: <u>Buick</u>	Color: <u>Blue</u>	Tag Number: <u>T 436 T</u>	Owner: <u>Yes.</u>
2. Year/Make/Model:	Color:	Tag Number:	Owner:

PART D: MONTHLY FINANCIAL STATEMENT			
Net Income From Employment (Attach proof of earnings) <u>2000.</u>		Past Due Debts: _____ Amount Past Due: _____	
Other Income: <u>3700. -</u>			
TOTAL MONTHLY INCOME <u>5700. -</u>			
TOTAL MONTHLY EXPENSES <u>4200. -</u>			
Do you have a checking account? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Do you have a savings account? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<input type="checkbox"/> Individual <input type="checkbox"/> Joint Balance: _____		<input type="checkbox"/> Individual <input type="checkbox"/> Joint Balance: _____	
Bank Name: _____		Bank Name: <u>McLure Credit Union</u>	
Account Number: _____		Account Number: <u>330 29</u>	

Date	Amount	Method of Payment	Description of Item
		<u>None</u>	

**GOVERNMENT  
EXHIBIT  
A  
(ID)**

